



Application for a Water Right Permit

For Ecology Use
(Date Stamp)

RECEIVED

SEP 13 2012

WA State Department
of Ecology (SWRO)

Follow the attached instructions. ~~Attach additional sheets as necessary.~~

- ☐ GROUND WATER ☒ SURFACE WATER
- ☐ PERMANENT ☐ SHORT TERM ☐ TEMPORARY
- ☐ DROUGHT

***A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.**

Section 1. APPLICANT

- ☐ I have participated in a pre-application conference with Ecology.

Applicant/Business Name:	Dennis Payne Francois	808-347-4242	Other No:
Address: 2906 Capitol Blvd S			
City:	Olympia	State:	Wa
Zip:	98501		
Email Address (if available):	dennis.Payne@alliedbuilding.com		

Contact Name (if different from above):	Phone No:	Other No:
Relationship to Applicant:		
Address:		
City:	State:	Zip:
Email Address (if available):		

Legal Land Owner or Part Owner Name of the Proposed Place of Use:	Phone No:	Other No:
Dennis and Catherine Payne Francois: Parcel # 65400004000	808-347-4242	
Lot 40 North Shore Summitt Lake Volume II pages 82-83		
Address: 2241 Summit Lake Shore rd		
City:	State:	Zip
Olympia	WA	98512
Email Address (if available):		

52-30603

9/13/12

Thurston/14

For Ecology Use	APPLICATION NO: <u>2-30603</u>	SEPA: Exempt/Not Exempt
	Fee Paid: <u>X</u> Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date <u>9-13-12</u> By <u>SC</u> WRIA: <u>14</u>
Pre-application interviewer: _____		

Section 2. STATEMENT OF INTENT

Do you own the land on which the proposed point of diversion/withdrawal is located? YES

If no, do you have legal authority to make this application for use of another's land? YES

Briefly describe the purpose of your proposed project: Water right certificate for the stated property

Anticipated length of time to complete your project: currently using lake for potable water

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
Domestic water supply	Normal GPM			continuous
TOTAL:				

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? NO

Is this request for a temporary permit? NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: 09/15/12 TO: ____/____/____

Section 3. POINT OF DIVERSION OR WITHDRAWAL

(Complete A or B, and C below)

A.) If Surface Water Source	B.) If Ground Water Source
-----------------------------	----------------------------

<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input checked="" type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: <u>Summitt Lake</u> Tributary to: _____ Number of proposed diversion points: <u>1</u> Do you have an existing diversion? NO <u>YES</u>	<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ Well diameter & depth: _____ Number of proposed points of withdrawal: _____ Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. _____
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	1/4	1/4	Section	Township	Range	County
65400004000						THURSTON
Lot(s)	Block(s)		Subdivision			
40	N. Shore Summitt Lake					

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
_____ Feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)
from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section _____.

Parcel No.	1/4	1/4	Section	Township	Range	County
			18	18	3	Thurston
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
_____ feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)
from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section _____.

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

Parcel Number 65400004000 – Lot 40 North Shore Summitt Lake Volume II Pages 82-83						
1/4	1/4	Section	Twp.	Range	County	Parcel No.

Do you own all the lands on which the proposed place of use is located? ☒ YES.

If no, do you have legal authority to make this application for use of another's land? ☒ YES

Provide owner name(s), address, and phone number: Dennis & Catherine Payne Francois 808-347-4242

Are there any other water rights or claims associated with this property or water system? ☒ NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): Currently have 50 feet of pipe drawing water to a pump 50 feet on shore. From the pump into a pressure tank, in turn pressurized water into the house at top of hill.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: <u>1</u>	Present population to be served water: _____
Type of connections: <u>Home</u> (e.g., home, recreational cabin)	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? NO	
If yes, date plan was approved ____ / ____ / Water System Number: _____	
Name of water system: _____	
Are you within the service area of an existing water system? NO	
If yes, explain why you are unable to connect to the system: _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = _____ 0 _____ ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____ none _____

Is the proposed project for a dairy farm? ☐ NO

Other Proposed Farm Uses

Describe all proposed uses: _____ N/A _____

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ NA _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? NO

Are you proposing to store more than 10 acre-feet of water? NO

Will the water depth be 10 feet or more? NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: _____

H

Highway 8 towards Aberdeen Washington. Turn right on to Summitt Lake shore rd nw. Stay to the left and at 2241 turn into driveway on the right

Site Address: 2241 Summitt Lake Shore RD NW

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

<p>_____ Dennis Payne Francois Print Name (Applicant or authorized representative)</p>	<p>_____ Signature</p>	<p>9.10.12 Date</p>
<p>_____ Catherine Payne Francois Print Name (Legal Owner or Part Owner Place of Use)</p>	<p>_____ Signature</p>	<p>9.10.12 Date</p>
<p>_____ Print Name (Legal Owner or Part Owner Place of Use)</p>	<p>_____ Signature</p>	<p>_____ Date</p>

Please check the region in which the project is located:

<p>*Submit your application to:</p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872.
Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

